

ADA Compliance Form – Contractor

Date:	Project number:		
Project name:			
Project address:			
Date plans were accepted:			
I hereby acknowledge that the above reference with the most current ADA is (Proposed Right-Of-Way Accessibility Company).	requirements set forth by PROWAG		
Printed name	-		
Title	-		
Signature	-		
Company name	-		
Address	-		
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Contact Phone Number	-		